
**SEMINOLE COUNTY GOVERNMENT
AGENDA MEMORANDUM****SUBJECT:** Renewal of Dental Insurance**DEPARTMENT:** Administrative Services**DIVISION:** Support Services**AUTHORIZED BY:** Frank Raymond**CONTACT:** Gregory Foppiani**EXT:** 5950**MOTION/RECOMMENDATION:**

Authorize renewal of the Dental Insurance as recommended by the Risk Management Executive Committee.

County-wide

Meloney Lung

BACKGROUND:

The dental insurance was bid in 2007 and the Board of County Commissioners approved the award to Starmark on September 11, 2007. This contract has a two (2) year term and runs from January 01, 2008 through December 31, 2009. Recently, Starmark changed names to Solstice Benefits, Inc.

There are currently 820 employees enrolled in the dental program. The total cost is paid by the employees.

Solstice Benefits, Inc. has presented their renewal, to be effective January 01, 2010 through December 31, 2010, with no rate increase and no benefit changes.

The Risk Management Executive Committee voted 5-0 to renew the current program with Solstice Benefits, Inc. on April 21, 2009.

STAFF RECOMMENDATION:

Staff recommends that the Board of County Commissioners authorizes renewal with Solstice Benefits, Inc., effective January 01, 2010 through December 31, 2010, with no rate increase and no benefit changes.

ATTACHMENTS:

1. Dental Contract

Additionally Reviewed By: No additional reviews



March 30, 2009

Ms. Wendy Garrett
Seminole County BCC
200 W. County Home Road
Sanford, FL 32773

Group # 12000, 12001 & 12002, Renewal

Dear Ms. Garrett:

As a valued client of Solstice Benefits, we thank you for your business over the past year.

Your contract renewal period is from January 1, 2010 through December 31, 2010. We are pleased to renew your Stellar Advantage PPO, Scheduled Dental and the Solstice S700 dental plans with no change in rates or benefits.

Please indicate your approval of the renewal by executing the attached Group Renewal Authorization Form and faxing to 954.476.8816, Attn: Group Renewals. Please feel free to call Group Administration at 954.476.1182 with any questions.

Our network of providers continues to increase, so we recommend that you visit our website at www.solsticebenefits.com for the most updated list of providers.

Please contact your representative for more information.

Thank you selecting Solstice Benefits!

Sincerely,

Group Administration

Solstice Benefits, Inc. Group Renewal Authorization

Client Name	Seminole County BCC		
Client Number	12000, 12001 & 12002		
Renewal Date	January 1, 2010		
Renewal Plan Name(s)	Stellar Advantage	Scheduled Dental	Solstice S700
Renewal Rates:			
Employee Only	\$28.86	\$18.04	\$12.70
Employee & 1 Dependent	\$50.80	\$30.90	\$22.16
Employee & Family	\$74.52	\$45.32	\$30.10
Are you having an open enrollment meeting?			
Number of full-time employees			
Authorized signature			
Print Name			
Title			
Email Address			
Date			

Please fax this executed renewal no later than 30 days prior to the renewal effective date.

Fax to: 954.476.8816, Attention Group Administration
Phone: 954.476.1182

The contract provisions on file with Solstice will be extended through the contract renewal period. A 30-day written cancellation clause applies to in force contracts.

